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Jeannie Camara

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Jeannie Camara

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Application Number : 10/644,318  
Applicant : Jaime Singson  
Filed : 19 August 2003  
TC/A.U. : 2163  
Examiner : Darno, Patrick A.

Confirmation Number: 6010

Docket Number : OR03-04001  
Customer No. : 51,067

M/S: Box Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria VA 22313-1450

### AMENDMENT

Sir

In response to the office action of **6 October 2006** and the advisory action of **22 August 2006**, please amend the above-identified application as follows:

**Amendments to the Claims** are reflected in the listing of claims which begins on page 2 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.

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(Signature of Person Mailing Paper or Fee)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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) Examiner: Darno, Patrick A.

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) Group Art Unit: 2163

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Mail Stop: Amendment  
Assistant Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

In connection with the above-referenced U. S. patent application, transmitted herewith are the following papers:

- ☒ Response under 37 C.F.R. § 1.111 to official action mailed 6 October 2006.
- ☐ A petition for extension of time is also enclosed with a fee of \$55.00 for a one-month extension for a small entity.
- ☐ Terminal disclaimer under 37 C.F. R. § 1.321(c), including
- ☐ check for \$130.00 fee under 37 C.F.R. § 1.20(d), and
- ☐ 2 certificates under 37 C.F.R. § 3.73(b).
- ☐ Information disclosure statement, form 1449 and \_\_\_ references.
- ☒ No additional claims fees are required.

☐ An additional fee is required, and is calculated as shown below:

AMENDED CLAIMS					
	NO. OF CLAIMS	HIGHEST NO. OF CLAIMS PREVIOUSLY PAID FOR	EXTRA CLAIMS	RATE	ADDT'L FEE
Total Claims		MINUS = 20	0	x \$18 =	
Independent Claims		MINUS = 3	0	x \$78 =	
If Amendment adds multiple dependent claims, add \$260.00					
Total Amendment Fee					
If small entity status is claimed, subtract 50% of Total Amendment Fee					
<b>TOTAL ADDITIONAL FEE DUE FOR THIS AMENDMENT</b>					<b>\$0.00</b>

- ☐ A check in the amount of \$\_\_\_\_ is enclosed.
- ☐ Charge \$\_\_\_\_ to Deposit Account No. \_\_\_\_ (Docket No. \_\_\_\_).
- ☒ Please deduct any underpayments, credit any overpayments, and charge all required extension of time fees to Deposit Account Number 50-1003. (Docket No. OR03-04001).

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Respectfully submitted,

By



Edward J. Grundler  
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Date: 18 October 2006